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21130 7590 02/23/2004

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<b>Christina R. Correll</b>	(Depositor's name)
<i>Christina R. Correll</i>	(Signature)
<b>May 24, 2004</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/643,277	08/22/2000	M. Bud Nelson	B-28	8660

TITLE OF INVENTION: COMPOSITIONS, ASSAY KITS, AND METHODS FOR USE RELATED TO A DISEASE CONDITION COMPRISING MULTIPLE SCLEROSIS AND/OR A PRO-MS IMMUNE RESPONSE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	05/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAUNDERS, DAVID A	1644	435-007920

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<b>1 Benesch, Friedlander, 2 Coplan &amp; Aronoff LLP</b> 3 _____

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**BioCrystal, Ltd.**

**Westerville, OH**

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

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